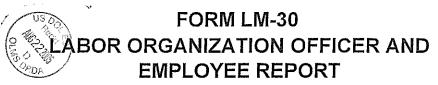
U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210



Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.

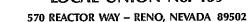
For Official Use Only				
READ THE INSTRUCTIONS CAREFUL	READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.			
E				
E-M-National-1				
1. File Number U - 11/22	2. Fiscal Year Covered From:			
Walter works the Production of Marie 1	01 / 01 / 2004 Through: 12 / 81 / 2004			
3. Name and address of person filing.	4. Name, file number, and address of labor organization.			
Name Richard Daly	Name Laborers! Inter. Union of No. America 16			
	Labor Organization File Number			
P.O. Box, Bldg., Room No., if any	P.O. Box, Building and Room Number, if any			
Street 570 Reactor Way	Street 570 Reactor Way			
City Reno	City Reno			
State NV: ZIP Code + 4 89502	State NV ZIP Code + 4 89502			
5. Position in labor organization.				
Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests				
(except as specified in the exclusions set forth in the instructions):				
A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.				
	7.a. Nature of Interest, Transaction, or Income.			
Name	off the neglection between the property of the			
Trade Name, if any:				
P.O. Box, Bldg., Room No., if any	7.b. Amount.			
Street				
City				
State ZIP Code + 4				
Signature				
15. Signature and verification. The undersigned declares, under penalty of Pe submitted in this report (including the information contained in any accompanying undersigned's knowledge and belief, true, correct, and complete. (See the section	rjury and other applicable penalties of the law, that all of the information			
The state of the s	on on penalties in the instructions.)			
Signed Right Duff	On 08/15/2005 775/856-0169 Date Telephone Number			

14.a. Nature of payment. 14.a. Nature of payment. 14.a. Nature of payment. 14.a. Nature of payment. 15.a. Name 15.a. Name 15.a. Name 15.a. Nature of payment. 16.a. N	***					
aubstands part of which condists of buying from, selling or lessing (b, or otherwise dealing with the business of date employer with abor organization presents of its elevable seeking to oppose the organization or with a feet of which seeking seeking to present of or sellow sheeking with your risks or otherwise dealing with your risks or organization or with a feet of which your behalf organization or with a feet of which you fished organization is white-seeking. 8. Name and address of Business (including Yaden name, if any). Name Northwest Cooperation Pund/LECRT Trade Name, if any: P. O. Box, Birg., Room No., if any	Name of Person Filing Richard Daly		File Number U-			
Name Northwest Cooperation Fund/LECET Trade Name, if any: P.O. Box, Bldg., Room No., If any State 11. Approximate dollar value of such dealing. 12. Andurr of internal held of income received. 13. Andurr of internal held of income received. 14. Approximate dollar value of such dealing. 15. Approximate dollar value of such dealing. 16. Approximate dollar value of such dealing. 16. Approximate dollar value of such dealing. 18. Approximate dollar valu	B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise					
Name Trade Name, if any:	Name Northwest Cooperation Fund/LECET Trade Name, if any: P.O. Box, Bldg., Room No., if any Street 12201 Tukwila Inter. Blvd. Ste 145 City Tukwila	a. Labor Organizat b. Trust c. Employer	tion			
Name Trade Name, if any:		14 a Natura of such doctin				
State	Name Trade Name, if any: P.O. Box, Bldg., Room No., if any	LECET is an edu projects, advar interests and i	nction trust to identify nce shared market related Increase Union market share.			
Doard meetings. 12.b. Amount. 13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any). 14.a. Nature of payment. 14.a. Nature of payment. 15.c. Name amount of payment. 16.c. Name amount of payment. 17.c. Name amount of payment. 18.c. Nature of payment.	City					
C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value. 13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any). Name Trade Name, if any: P.O. Box, Bidg., Room No., if any Street City State ZIP Code + 4 14.b. Amount of payment.	State ZIP Code + 4		a daya a sana a san			
or from any labor relations consultant to an employer any payment of money or other thing of value. 13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any). 14.a. Nature of payment. 14.a. Nature of payment. 15.a. Na		12.b. Amount.	\$1508			
(including trade name, if any). Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City ZIP Code + 4 14.b. Amount of payment.	C. Received from any employer (other than an employer covered under parts A and B above)					
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Street City State ZIP Code + 4 114.b. Amount of payment.	Trade Name, if any:					
State ZIP Code + 4 Land 14.b. Amount of payment.						
normal to the state of the stat	13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.				

Name of Person Filing Richard Daly		File Number U-			
B. Held an interest in or derived income or economic benefit with monetary visubstantial part of which consists of buying from, selling or leasing to, or other of an employer whose employees your labor organization represents or is active any part of which consists of buying from or selling or leasing directly or in dealing with your labor organization or with a trust in which your labor organization.	rwise dealing with the business tively seeking to represent, or directly to, or otherwise	S			
8. Name and address of Business (including trade name, if any). Name Northern Nevada Laborers' AGC Training Trade Name, if any: P.O. Box, Bldg., Room No., if any Street 445 Apple Street City Reno State NV ZIP Code + 4 89510	9. Business deals with: Irust x a. Labor Organizal b. Trust c. Employer	tion			
10. If 9.b. or 9.c. is checked give trust or employer's name. Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4	laborers and ap	e of such dealing.			
	12.b. Amount.	\$1219			
C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.					
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.				
Name					
Trade Name, if any:					
P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4					
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.	description is a section of the contract of th			

ame of Person Filing Richard Daly		File Number U-		
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.				
8. Name and address of Business (including trade name, if any). Name Laborers' Pension Trust for No. Nevada Trade Name, if any: P.O. Box, Bldg., Room No., if any Street 445 Apple Street City Reno State NV ZIP Code + 4 89510	9. Business deals with: a. Labor Organiza b. Trust c. Employer	tion		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealir	ng.		
Name Trade Name, if any: P.O. Box, Bldg., Room No., if any	Pension Trust e Bargaining	stablished under Collective		
Street	11.b. Approximate dollar value	e of such dealing.		
City	12.a. Nature of interest held			
State ZIP Code + 4		nses for travel to ining for Trustees		
	12.b. Amount.	\$1693		
C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.				
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14,a. Nature of payment.			
Name	politika na pipulika sebe yaki basan Panangan yakisan kalipate	and the second of the second o		
Trade Name, if any:				
P.O. Box, Bldg., Room No., if any				
Street				
City				
State ZIP Code + 4				
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.			

LABORERS' INTERNATIONAL UNION of NORTH AMERICA LOCAL UNION No. 169



TEL. (775) 856-0169



FAX (775) 856-0177



August 15, 2005

U.S. Department of Labor Employee Standards Administration Office of Labor –Management Standards 200 Constitution Avenue, NW Room N-5616 Washington, D.C. 20210

Form LM-30 Filing for Richard Daly

Dear Sir or Madam:

Re:

Enclosed is my Labor Organization Officer and Employee Report LM-30 for the 2004 reporting period.

It may be possible that a covered employer or business not listed on my LM-30 report for 2004 provided something of value as to which I have neither documentary record nor any present specific recollection. In accordance with your guidance, it is my understanding that, in that circumstance, I am not required to take any further action.

This filling reflects my good faith effort to comply with the LM-30 reporting provisions and in doing so; I have relied upon the evolving guidance from the Department. The enclosed material represents my best recollection and estimate of all lawfully reported benefits that I received in 2004.

Very truly yours,

Richard Daly

Business Manager-

Secretary/Treasurer

RD/mk

ADDENDA TO THE LM-30 FORM WHICH IS TO BE INCORPORATED AND MADE PART OF THE LM-30 FORM

ADDENDUM A [UNSOLICITED GIFTS OR PROMOTIONAL ITEMS]

On several occasions in 2004, I recall that I was given [a] complimentary promotional items[s], such as a [clothing item, accessory or printed material w/with LIUNA logo, etc.]. At no time did I solicit such item[s], and they were sent to my office without my prior knowledge or authorization. I did not retain possession of any of these items nor did any member of my family. I have no knowledge as to the value of the item[s], and do not recall the manufacturer or provider of such [an] item[s].

ADDENDUM B [UNSOLICITED HOLIDAY GIFTS]

On several occasions in 2004, particularly during holiday seasons, I recall that I was given complimentary items, a [wine and cheese basket, fruit basket, holiday ham, holiday turkey, gourmet foods, etc.]. At no time did I solicit such item[s], and it/they were sent to my office without my prior knowledge or authorization. I did not retain possession of any of these items, as I shared them with the individuals in my office. My actions were in line with published Office of Government Ethics guidelines, which state, "When it is not practical to return a tangible item because it is perishable, the item may, at the discretion of the employee's supervisor or an agency ethics official, be given to an appropriate charity, shared within the recipient's office, or destroyed." C.F.R. 2635.205.

ADDENDUM C [MEALS/EVENTS WITH FRIENDS]

I have personal friendships with individuals who may be employed by reportable entities under the LMRDA, which exist separate and apart from my role as a union officer/employee. In 2004, it is conceivable that I received the benefit of a meal, refreshment or social event from these individuals, which I did not report because I do not have any records of these personal encounters and/or have no specific recollection of any benefits received.

ADDENDUM D [MEAL/EVENTS WITHOUT SPECIFI RECORDS OR RECOLLETION]

It is conceivable that I received the benefit of a meal, refreshment or social event from an individual; who may be employed by a reportable entity under the Labor-Management Reporting and Disclosure Act, which I did not report because I do not have any records of these encounters and have no specific recollection of any benefits received.

ADDENDUM E [UNION TO UNION BENEFITS]

I am not reporting any benefits that I may have received in 2004 from labor organizations affiliated with the Laborer's International Union of North America ("LIUNA"), my employer, or other labor organizations. My understanding of guidance received by the AFL-CIO from the Department of Labor is that benefits received from LIUNA-affiliated labor organizations and other labor organizations are not reportable on the LM-30 report, and I am following that guidance.

ADDENDUM F

In filing this report, I am in no way admitting or agreeing that any of the Trusts contained in this filing are or can be defined as businesses, or otherwise deal with the Union or its employers.

When reading Section 202 of the LMRDA, I found no references to Trusts, and the LMRDA does not define business.

I am filing this LM-30 report as a precaution that one or more of the incidences reported are or will at some time be deemed to be reportable by an authority higher than the DOL's opinion.